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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/368,996	08/05/1999	TIMOTHY P. BARBER	2-604.2-1	6192

4955 7590 05/09/2003

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EXAMINER

WASYLCHAK, STEVEN R

ART UNIT	PAPER NUMBER
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3624

DATE MAILED: 05/09/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

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Interview Summary	Applicant(s)	09/368,996	BARBER, TIMOTHY P.
	Examiner	Steven R. Wasylchak	Art Unit 3624

All participants (applicant, applicant's representative, PTO personnel):

- (1) Steven R. Wasylchak. (3) Atty. Jim Retter.
 (2) Primary Hani Kazimi. (4) _____.

Date of Interview: 25 March 2003.

Type: a) ☒ Telephonic b) ☐ Video Conference
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.
 If Yes, brief description: _____.

Claim(s) discussed: NONE.

Identification of prior art discussed: Toader(US 5,774,869), Usui(US 5,956,697) and Egendorf(US 5,794,221).

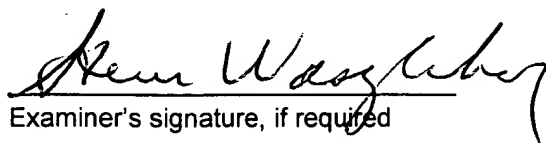
Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Separate office actions by Exr. Daniel Felton and Exr. Steven Wasylchak were apparently inconsistent and a new office action is required.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.


 Examiner's signature, if required